

**State of Nevada**  
**Board of Cosmetology**

1785 E. Sahara, #255  
Las Vegas, NV 89104  
Phone (702) 486-6542  
Fax (702) 369-8064



**State of Nevada**  
**Board of Cosmetology**

4600 Kietzke Lane Bldg K Suite 221  
Reno, NV 89502  
Phone (775) 688-1442  
Fax (775) 688-1441

**APPLICATION REQUEST FORM**

☐ Reinstatement a Nevada license

If Nevada State Board of Cosmetology issued you a license number, then please fill out the section below and we will send an application within 7 business days.

☐ Out of State Student

Have your State Board or school MAIL a certified breakdown of your hours to Nevada State Board of Cosmetology for review.

Check with the Nevada State Board of Cosmetology for receipt of hours prior to submitting application

TO RECEIVE AN APPLICATION PACKET with all necessary forms required, complete the attached form below and return it to the address listed above with a **MONEY ORDER OR CASHIER'S CHECK ONLY** in the amount of \$15.00 for your application fee. **PLEASE DO NOT SEND CASH IN THE MAIL** and **DO NOT SEND A PERSONAL CHECK FROM ANY STATE.**

**DO NOT SEND ANY DOCUMENTS AT THIS TIME!**

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Legal Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Current Address: \_\_\_\_\_  
\_\_\_\_\_

County: \_\_\_\_\_

Day Phone #: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
State where hours completed: \_\_\_\_\_ Nevada  
OR License number: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

(Please check one only)

Type of license: Cosmetologist ☐  
Nail Technology ☐  
Hair Designer ☐  
Aesthetician ☐  
Electrologist ☐  
Instructor ☐  
Cosmetic Demonstrator ☐

(Must apply and receive a Nevada license first)

**FOR OFFICE USE ONLY BELOW THIS LINE**

Paid \$ \_\_\_\_\_ How: \_\_\_\_\_ File #: \_\_\_\_\_ Entity #: \_\_\_\_\_ Date Received: \_\_\_\_\_  
Receipt #: \_\_\_\_\_